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CONFIRMATION NO. 2135

SERIAL NUMBER 10/687,375	FILING DATE 10/15/2003 RULE	CLASS 705	GROUP ART UNIT 3626	ATTORNEY DOCKET NO. BIZ-1
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APPLICANTS

Richard D.. Goshert, Columbia City, IN;

**** CONTINUING DATA *******

This appln claims benefit of 60/418,929 10/16/2002 *

(*)Data provided by applicant is not consistent with PTO records.

OK LN 7-25-05

**** FOREIGN APPLICATIONS *******

none LN 7-25-05

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

**** 04/27/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 21	TOTAL CLAIMS 99	INDEPENDENT CLAIMS 10
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *Dina Majumdar LN*
 Examiner's Signature Initials

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TITLE
 System and method to evaluate crop insurance plans

FILING FEE RECEIVED 1462	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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